		Departm [ent of Pu Division o	blic H f Envi	ealt iron	h ai mei	nd So	cial Se ealth						
		Food Es							Report Page	1 2				
Regular TY	grade.					ESTABLISHMENT NAME JOSIE'S SPECIAL BATCHOY AND FAST FOUR								
Follow-up	10	TIME IN	TIME OUT	PE	PERMIT HOLDER									
Complaint	RATING		4110 pm		TALUYAN, JOSIE P.									
Investigation Other:	+A	170001614	RMIT NO.			ATION (Address) 7 3 TRACT 217 DEDEDO CUAM								
ESTABLISHM	ENT TYPE	AREA	TELEPHON	E No.	- 1	ion Violations B RISK CA	TEGORY							
RESTAURA	STAURANT 633-4383					No. of Repeat Risk Factor/Intervention Violations Ø 3								
FC				-	-	_		_	EALTH INTERVENTIONS	-				
Circle designated compliance (IN, OUT, N/O, N/A) for each numbered Item. Mark "X" in appropriate box for COS and/or R. IN = in compliance OUT = Not in compliance N/O = Not observed N/A = Not applicable COS = Corrected on-site during inspection R = Repeat violation PTS = Demerit p									arit points					
Compliance Status	Cum	amialaa	cos	R PT	PTS Compliance Status COS R PTS									
Supervision Person in charge present, demonstrates				6	1	16	IN OUT		Proper cooking time and temperatures	6				
Nowledge, and performance duties Employee Health				- 0	4				Proper reheating procedures for hot holding	6				
2 (b) OUT		areness; policy present	T	6	11				Proper cooling time and temperature Proper hot holding temperatures	6				
3 (P) OUT		orting, restriction & exclu	sion	6] [N) OUT		Proper cold holding temperatures	6				
4 N OUT N/A N/A	Proper eating tax	enic Practices sting, drinking, beteinut, o	r	1 0	11	21 4	ny out	N/A N/C	Proper date marking and disposition	6				
0	tobacco use			6					Consumer Advisory					
5 NA NA NA	5 OUT N/A N/O No discharge from eyes, nose, and mouth Preventing Contamination by Hands			6	11	22	IN OUT	P	Consumer Advisory provided for raw or	6				
6 OUT N/A N/	Hands clean and	properly washed		6	1				undercooked foods					
7 OUT N/A N/A	No bare hand cor approved alternal		6	11	00		4 0	Highly Susceptible Populations Pasteurized Foods used; prohibited foods not						
Adequate handwashing facilities supplied &				6	٦,	23	IN OUT	W.	offered	6				
	accessible Approv	red Source			11	24	IN OUT		Chemical					
9 NO OUT Food obtained from approved source				6	1	24	IN OUT		Food additives: approved and properly used	6				
10 IN OUT N/A 70				6	+1	251	оит 🧖		Toxic substances properly identified, stored, used	6				
12 IN OUT WA N/O Required records available: shellstock tags,				6	1		formance with Approved Procedures							
parasite destruction Protection from Contamination					Н	26	IN OUT	WA)	Compliance with variance, specialized process, and HACCP plan	6				
13 TN OUT N/A Food separated and protected				6] `				re Improper practices or procedures identified as the m					
14 NOUT N/A Food contact surfaces: cleaned & sanitized 15 OUT Proper disposition of returned, previously				6	+	buting factors of foodborne litness or injury. Public Heare control measures to prevent foodborne litness or inju								
1500000	served, recondition	ned, and unsafe food	*00D D		I D	DA	dia conservation		o solitor modulos to provent toodsorrie limitus ar inju	170				
	Good Retail Pract		SOOD R			-		_	micals, and physical objects into foods					
								inspection R =Repeat violation PTS =Dement po						
Compliance Status Safe Food and Water			cos	R PT	S	Proper Use of Utensils	R PTS							
27 Pasteurized eggs used where required				1	16	40	In-	use uten	sils: properly stored	1				
28 Water and Ice from approved source				2	11	41		ensils, ed ndled	quipment and linens: properly stored, dried,	1				
29 Variance obtained for specialized processing methods				1	1 [42		single-service articles: properly stored, used	1					
Proper cor		erature Control	1 1	1	4 1	43	Gi	d properly Utensils, Equipment and Vending	1					
Proper cooling methods used; adequate equipment for temperature control				1	4 1	44		od and n	onfood-contact surfaces cleanable, properly	1				
31 Plant food properly cooked for hot holding			-	1	-1 1-	-			constructed, and used ing facilities: installed, maintained, used; test	_				
32 Approved thawing methods used			\rightarrow	1	- 1	45 46	str	DS		1				
Thermometer provided and accurate Food Identification					16	46 Nonfood-contact surfaces clean Physical Facilities								
34 Food properly labeled; original container] 1		47 Hot & cold water available, adequate pressure 48 Plumbing installed; proper backflow devices				2				
Prevention of Food Contamination 35 Insects, rodents, and animals not present			- 1 1	2		48 49	$\overline{}$		d wastewater properly disposed	2				
36 Contamination prevented during food peparation, storage &			a &	1	7 6	50 Toilet facilities: properly constructed, supplied, & clear			es: properly constructed, supplied, & cleaned	2				
37 Personal cleanliness				1		51 Garbage/refuse properly disposed; facilities maintai			fuse properly disposed; facilities maintained	2				
38 Wiping cloths: properly used and stored 39 Washing fruits and vegetables				1		52 Physical facilities installed, maintained, and clean 53 Adequate ventilation and lighting; designated areas use				1				
NAME AND ADDRESS OF TAXABLE PARTY.	NAME AND ADDRESS OF THE OWNER, WHEN PERSON NAMED IN	e violation(s), and I	am aware o	f the c										
Person in Charge (Prin	t and Sign) Vo	N CABRAL						D	ate: 01/4/18	4.				
DEH Inspector (Print a	nd Sign)	N CABRAL						6.	pillow-up (Circle one): YES PO Follow-up	Date				
JAHU (.01	Uhitea Pinting	EU V	Merce	Ear-d'	P-4-1-11-1		TV/A					

	Depart	ment of Publ Division of I			ervices				
	Food F	Establish			Report	Page	2 of 2		
	HMENT NAME		LOCATION	(Address)					
JOSIE	'S SPECIAL BATCHOY AND	LOT _	3 TRACT	217 012	DEDO CUAN	7			
INS	SANITARY PERMI	TNO.	TAC.	DIDER DYAN, J	OSIE P.		44		
	TE	MPERATU	RE OBS	ERVÁTIO	NS				
Item/Location Tempera			e (° F)		tem/Location	Те	mperature (* F)		
FRIED		150.0							
E 6672	ANTEEGU/ "	130.0							
			- 41						
							CORRECT		
ITEM NO.	OBSERV	ATIONS AN	ND CORI	RECTIVE A	CTIONS		BY DATE		
Violation	s cited in this report must be corr	ected within	the time f	rames indica	ited, or as state	ed in Sections	8-405.11 and		
		8-406.11 of t							
	A FULLOW-UP INSPE	-CIION	WA	5 CON	DULTED	BASED			
	ON PREVIOUS INSPL	CTIUN	COND	UCTED	ON 12	127/17			
	(13/B).								
						- I SV -			
	THE FOLLOWING WA	S OBSE	RVED:						
				, =11					
	ALL PREVIOUS VIULAT	10NS (I	TEMS	# 35	36, 38,	42,44.			
	45, 46, 47, 49, 85	2) HAV	B BEE	N conn	ECTED.	,			
	NO NEW VIOLATIONS								
	REMOVED B PLACARD	# Bloo2	n av						
4	REMOVED B PLACARD # 01002 135UED "A" PLACARD # 02627								
							W W		
	BRIEFED PIL ON ABO	VE.							
			-						
Based on the	inspection today, the items listed above identify v	violations which sl	hall be correct	ed by the date sp	ecified by the Departr	nent. Failure to comp	oly may result in		
date.	story actions. If seeking to appeal the result of thi	s inspection, a wri	itten request fe	or hearing must b	submitted to the Di	rector before the indi	cated correction		
Person in Cha	arge (Print and Sign)					Date:	18		
DEH Inspecto	r (Print and Sign)				0	Date:	1.4		
Jame	a CMI					1/18	118		